

MARYLAND HEALTH CARE COMMISSION

BID BOARD NOTICE

Procurement ID Number: **MHCC 12-019**

Issue Date: **December 14, 2011**

Title: **Health Information Exchange – Ambulatory Practice
Connectivity Strategy**

I. Purpose

The Maryland Health Care Commission (MHCC or Commission) will select a contractor on a time and materials basis to develop innovative recommendations around accelerating ambulatory practice connectivity to the state designated health information exchange (HIE). Ambulatory practices are able to connect to the state designated HIE to query an individual's health record, view lab results, publish data, receive data, and eventually send secure direct messages. The MHCC is seeking a contractor to identify existing barriers and propose practical solutions to connecting ambulatory practices to the state designated HIE. The contractor is required to consider practice level challenges and barriers specific to electronic health records (EHRs) and propose implementable solutions for connecting ambulatory practices. The contractor will complete the work in consultation with the state designated HIE.

Electronic health information is a key component to supporting significant improvements in disease management, medical error reduction, and health care quality reporting. Assessing the challenges of ambulatory practices in connecting to the state designated HIE will guide policy development for the exchange of electronic health information. The MHCC seeks a contractor who will propose implementable solutions that will lead to ambulatory practices connecting to the state designated HIE for querying or sending secure messages. The outcome of this contract will be a detailed report that describes the barriers and proposes appropriate solutions to electronic health information exchange among ambulatory practices.

The MHCC is the state agency responsible for expanding health information technology in Maryland. HIE is an essential foundation for the success and sustainability of meaningful health care system improvements. Various state initiatives are underway to increase EHR adoption and implement a state designated HIE. Currently, nearly all of the 46 acute care hospitals are sending data through the state designated HIE; a logical next step is to accelerate connectivity with the approximately 5,607 ambulatory practices in Maryland.

II. Requirements

The MHCC seeks a contractor that can identify technology and process challenges in connecting ambulatory practices to the state designated HIE, develop mitigation strategies to the challenges, and propose practical implementable solutions vetted by the state medical society. The contractor is required to examine other state best practices and strategies in connecting ambulatory practices to HIEs. As part of the work, the contractor is required to develop and administer an environmental scan of Maryland ambulatory practices that have adopted an EHR with questions aimed at advancing connectivity. The contractor is also required to identify technology challenges and propose short term solutions in connecting EHRs to the statewide HIE. Coordinating with leading EHR vendors on technology challenges and solutions is required.

The results of the contract will be a detailed and implementable report that represents the findings in aggregate presented to the MHCC, the state designated HIE, and the medical society. The report should represent the findings written in a manner consistent with other legislative reports developed by the MHCC. Through a combination of environmental scans, interviews, and focus groups, the contractor is required to develop a report that, at a minimum, includes the following elements:

- Identify challenges both perceived and actual including human and technical, and propose practical solutions that can be deployed to connect ambulatory practices to the state designated HIE;
- What ambulatory practices need in general to connect to the state designated HIE;
- The level of readiness among ambulatory practices with an EHR to connect to the state designated HIE;
- A realistic timeframe for connecting ambulatory practices to the state designated HIE;
- Recommended price points for connectivity based on service that ambulatory practices are willing to pay;
- Barriers to implementing and utilizing HIE in general, how these challenges apply to ambulatory practices specifically, and practical solutions;
- An assessment of the state designated HIE's ability to connect ambulatory practices to the HIE at an accelerated rate;
- Realistic strategies that engage employers, consumers, hospitals, and payers that can drive ambulatory practice connectivity; and
- Recommended HIE policies regarding ambulatory practice connectivity.

Focus Groups

At least one meeting must occur in Western Maryland (including Allegany, Fredrick, Garrett and Washington counties); Central Maryland (including Anne Arundel, Baltimore, Calvert, Carroll, Charles, Harford, Howard, Montgomery, Prince George's, St. Mary's counties, and Baltimore City); and on the Eastern Shore (including Caroline, Cecil Dorchester, Kent, Queen Ann's, Somerset, Talbot, Wicomico, and Worcester counties). Focus groups must have a minimum of 15 providers and ideally include the office manager from each ambulatory practices in attendance as well as representation from practices participating with the Maryland Regional Extension Center; the contractor is encouraged to include leadership from the component medical societies in the discussions. The contractor must detail their approach for achieving the minimum provider attendance levels for focus group meetings and a contingency plan in case the actual participation falls below the minimum level. In addition, the contractor is required to convene at least one focus group with employers and one focus group with payers with MHCC approved adequate representation to discuss ways to promote ambulatory practice participation in the state designated HIE.

Alternatively, the responder may propose a different approach. The contractor has some latitude in deciding how to carry out contract responsibilities and to make suggestions that will improve the project scope. Potential contractors must specify their general approach in their response to this Bid Board Notice. If a bidder proposes to subcontract tasks, such as information gathering, analysis, and document development, the contractor must clearly identify and provide a detailed description of how all subcontractor(s) will carry out their assigned tasks. The contractor **must** have familiarity with the state designated HIE and ambulatory care practices in Maryland. **The MHCC must approve all activities specific to each task prior to performance of the work, and approve all deliverables before the deliverable will be considered complete.**

Contract Deliverables & Due Dates

Key Deliverables	Due Date
Submit bi-weekly status reports on activities of the contractor	Ongoing
Participate in bi-weekly status meetings (in-person or telephone conference call) with the MHCC	Ongoing
Report outline draft	01/10/12
Final report outline	01/17/12
Draft environmental scan/focus groups/interview questions	01/13/12
Final environmental scan/focus groups/interview questions	01/24/12
Conduct environmental scan/focus groups/interviews	02/01/12
Results of the environmental scan/focus groups/interviews	03/31/12
Draft introduction and background section of the report	02/20/12
Final introduction and background section of the report	03/05/12
Challenges and proposed solutions that can be deployed to connect ambulatory practices to the state designated HIE – draft section of the report	02/17/12
Challenges and proposed solutions that can be deployed to connect ambulatory practices to the state designated HIE – final section of the report	03/02/12
What ambulatory practices need in general to connect to the state designated HIE – draft section of report	03/19/12
What ambulatory practices need in general to connect to the state designated HIE – final section of report	03/26/12
Level of readiness among ambulatory practices with an EHR to connect to the state designated HIE – draft section of report	03/19/12
Level of readiness among ambulatory practices with an EHR to connect to the state designated HIE – final section of report	03/26/12
Timeframe for connecting ambulatory practices to the state designated HIE – draft section of report	03/21/12
Timeframe for connecting ambulatory practices to the state designated HIE – final section of report	04/06/12
Recommended price points for connectivity based on service that ambulatory practices are willing to pay – draft section of report	03/21/12
Recommended price points for connectivity based on service that ambulatory practices are willing to pay – final section of report	04/06/12
Barriers to implementing and utilizing HIE in general, how these challenges apply to ambulatory practices specifically, and practical solutions – draft section of report	03/21/12
Barriers to implementing and utilizing HIE in general, how these challenges apply to ambulatory practices specifically, and practical solutions – final section of report	04/06/12
Assessment of the state designated HIE’s ability to connect ambulatory practices to the HIE at an accelerated rate – draft section of report	04/02/12
Assessment of the state designated HIE’s ability to connect ambulatory practices to the HIE at an accelerated rate – final section of report	04/23/12
Realistic strategies that engage employers, consumers, hospitals, and payers that can drive ambulatory practice connectivity – draft section of report	04/02/12
Realistic strategies that engage employers, consumers, hospitals, and payers that can drive ambulatory practice connectivity – final section of report	04/23/12
Recommended HIE policies regarding ambulatory practice connectivity – draft section of report	05/01/11
Recommended HIE policies regarding ambulatory practice connectivity – final section of report	05/08/12
Final report	05/15/12

Note: Contract deliverables/due dates are tentative; therefore, contract deliverables/due dates are subject to change at the discretion of the MHCC.

Staffing Requirements

The contractor may propose to augment or revise the following list of required personnel. The contractor must demonstrate how its proposed staffing model will complete the tasks in a timely manner. Proposals must include an hourly rate for the work to be performed and an estimate of the total number of hours required to complete each task.

Staffing Design

Labor Categories	Description
Project Director	A senior level individual that will coordinate all aspects of the work, take responsibility for meeting the schedule of deliverables, and ensure the delivery of high quality work products. (Writing sample required).
Project Manager	A management level individual with experience in managing workgroups that can ensure broad participation and facilitate discussion among all participants. (Writing sample required).
Policy Analyst	A technical expert with at least five years of health information technology and report writing experience. (Writing sample required).

REFERENCES

As part of its proposal the contractor will be required to include references for similar work it has performed in health information technology activities and, if available, work performed specifically in provider targeted strategies.

TERM OF CONTRACT

The contract begins on **January 5, 2011** and ends on **August 15, 2012**. Contractor billing is required by the 15th of the month for the prior month and must include a description of the completed tasks in accordance with the Deliverable Schedule in Section II. All deliverables and work must be performed to the satisfaction of the MHCC for reimbursement approval.

ISSUING OFFICER

The Issuing Officer for this solicitation is Sharon Wiggins, Procurement Officer, **Maryland Health Care Commission, 4160 Patterson Avenue, Baltimore, Maryland 21215**.

SUBMISSION DEADLINE

To be eligible for consideration, proposals must be received by the Issuing Officer at the Commission office by 4:00 p.m. **December 29, 2011**. **All bids must include Federal Tax Identification Numbers**. Vendors mailing proposals should allow sufficient mail delivery time to ensure timely receipt by the Commission. Bids may also be submitted electronically to swiggins@mhcc.state.md.us by the specified date and time.

Each bidder must indicate their eMaryland Marketplace (eMM) vendor number in the Transmittal Letter. In order to receive a contract award, a vendor must be registered on eMM. Registration is free. Go to <https://ebidmarketplace.com/> and click of "Registration" to begin the process then follow the prompts.

PROCUREMENT METHOD

The procurement method for this solicitation is a Small Procurement as described in the Code of Maryland Regulations (COMAR) 21.05.07. **The maximum award allowed under these regulations is \$25,000.**

REQUIRED DOCUMENTS

1. Please provide a brief (10 pages or less) description of your approach to completing the tasks, which is required within one week of contract award notification.
2. Please include individual resumes, writing samples, and references for each of the personnel who are to be assigned if your organization is awarded the contract. (Appendices are not included in the page count.) Subcontractors, if any, must be identified, and a detailed description of their contributing role relative to the requirements of the proposal should be included in the proposal. Each resume should include the amount of experience the individual has completed relative to the work requested for this solicitation. Letters of intended commitment to work on the project from personnel must also be included.

TERMINATION CLAUSE

The State may terminate this contract at any time and for any reason. Bidders must acknowledge this statement in their response to this Bid Board Notice to be considered an acceptable response.

**MINORITY BUSINESS ENTERPRISES AND SMALL BUSINESSES
ARE ENCOURAGED TO RESPOND TO THIS SOLICITATION**